

SUMMARY OF FINDINGS

THE COMMUNITY RESOURCES FOR FAMILIES PROGRAM

Program Effectiveness Evaluation, 1999-2000

The Community Resources for Families (CRFF) program is a school-based partnership program between the Idaho Department of Health and Welfare and more than 90 independent school districts throughout the state of Idaho. The partnership provides Community Resources Workers (CRWs) for each participating school. These CRWs work in the schools with principals, counselors, and teachers to first identify and then support children who display evidence of physical or emotional needs arising outside of the school environment. The CRWs are licensed social workers who possess the ability to work closely with families on a voluntary basis to resolve issues that threaten the safety or learning ability of their children.

A unique aspect of the Community Resources for Families program is its ability to access Emergency Assistance funding to support families during a 90-day period. Although the total amount of dollars spent on any one family is minimal - the average is about \$680 per family annually, however, the impact of the money is significant. Families are supported in choosing areas of their life they need to improve immediately, and then learn how to continue those and other improvements on their own after the 90-day service. To achieve positive outcomes for children, the program has set three goals:

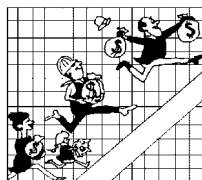
1. Strengthening families to prevent child abuse and neglect;
2. Increasing the school readiness of children
3. Increasing the self-reliance of families through utilization of community resources.

In the fall of 2000, a university evaluator was hired to conduct a program effectiveness evaluation of the Community Resources for Families program. To accomplish this task, 206 families were randomly chosen from statewide caseloads and data were subsequently collected from parent/guardian interviews; teacher, principal, or counselor interviews, case file analysis, and from CRWs evaluations of client progress. This data revealed interesting and exciting aspects of this program. The highlights of this evaluation are presented below. A more detailed document follows as an independent report.

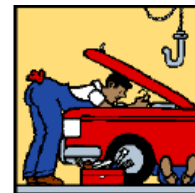
Who were the families we collected data from?



Average number of
children per family = 3



Average income per
Family = less than \$16,000



Percent of families with
1 or more person(s) working = 66%

The families in the study sample were for the most part two-parent families with one or both of the parents working but still making less than \$16,000 per year. The families have on average 3 children, at least one of whom was experiencing difficulties being successful in school due to family living situations rather than learning difficulties. Ninety-five (95%) of the families in this sample had not received TAFI (cash assistance from IDHW) before being referred to the CRFF program. Families had many basic needs including housing, food, and clothing, in addition to family support needs such as medicine, transportation, and counseling.

What did we learn about the progress the families made in reaching the goals of the program?

It was important for this study to measure how effective the program is in helping families reach the goals. To measure this effectiveness, each goal was looked at individually. To measure goal #1 - **increased child safety and well-being** - we looked at several important indicators of child safety.

First we looked at how many families had health care coverage at the beginning of their 90 days in the program. We found that 67% of families had some form of coverage. Next, we looked at how many families did not have health care coverage by the end of their service period. We found that only 10% of families had no coverage. This data showed that the program had achieved an important goal;

⇒ 90% of families without health care coverage found a way to get coverage with help from this program.

A second important measure of child safety and well-being is the access families have to medical and mental health services. Having health care coverage, however, does not always mean that it is used, so it was important to measure how many of the families actually made contacts with medical and counseling services during and after being in the Community Resources for Families program. Here is what we found:

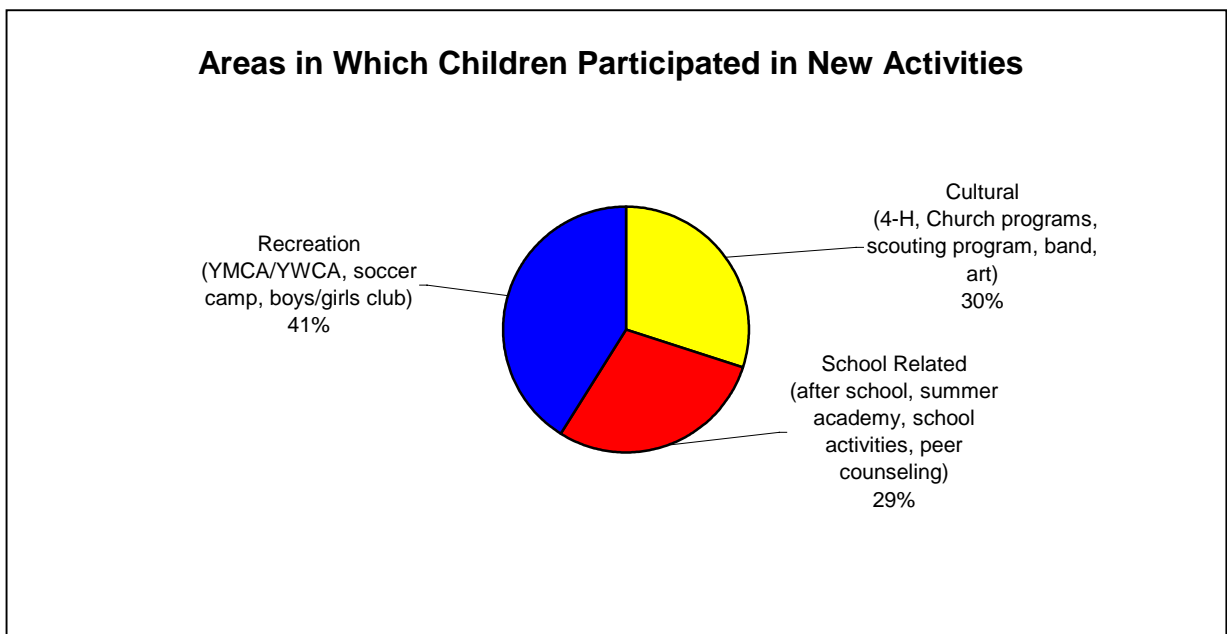
⇒ 49% of the families contacted medical services during or after services in the program;

⇒ 43% of families contacted counseling services during the program, and 20% of those continued after they left the program.

A third measurement of child safety and well-being was the connections children have to school or community activities. Children who are isolated and disconnected from their friends and community often face troubled and difficult futures. So it was important to measure how this program can influence families to ensure that their children participate in activities. This study found that:

⇒ 54% of families increased the participation of their children while in this program.

The following graph shows the types of activities children participated in as a result of being in the program:



A final measurement used to evaluate the effectiveness of the Community Resources for Families program in increasing child safety and well-being was the percent of the study families who had a valid referral to child protective services after being in the program. The study found two things:

- ⇒ 18% of the families had a referral to CPS after they received services, **but**
- ⇒ only 1% of the families had a referral to CPS that resulted in a valid finding of child abuse & neglect.

In terms of child safety and well-being, this study has come to the following conclusion:

Safety and Well-being Summary: The overall picture of increases in child safety and well-being as a result of referral to the Community Resources for Families program is one of an increased safety net for children. The families in this sample display an increased ability to help their children participate in school and community activities, as well as increased ability to meet the basic physical and emotional needs of children. In addition, the families themselves became more connected to community agencies as a result of service, and continued this connection after the end of service. This means that the physical and emotional needs of children could be met in ways that had previously not been available.

Goal #2: Increase the School Readiness of Children

The second goal of the Community Resource for Families program was also investigated by this study. This study wanted to evaluate how effective this program is in **increasing the school readiness** of children. To collect this information, CRWs interviewed school principals, counselors, and teachers. The school personnel were asked both about the performance of the children from last year right after they had completed the program, and about how those same students were performing in the early fall of 2000.

The school data revealed some exciting findings. How children perform in school is generally a sensitive indicator of how the rest of their life is going; it is hard to concentrate on learning when you're hungry or sick or worried about what's going on at home. Here's what the study found out about the children served by this program:

- ⇒ 34% of the families had children referred to the program for low grades. Of those children,
 - ⇒ 76% showed an improvement after being in the program;
 - ⇒ 57% showed continued improvement in fall 2000, months after service ended.

The study also found:

- ⇒ 36% of the families had children referred to the program for poor attendance. Of those children,
 - ⇒ 75% showed an improvement after being in the program, and
 - ⇒ 74% of those children showed continued improvement in fall, 2000.

School behavior is usually a very good indication of how children are feeling about their world. Improvements in school behavior are therefore critical indicators of successful support of children. This study found:

- ⇒ 47% of the families had children referred to the program for school behavior. Of those children,
- ⇒ 84% were reported by school personnel as making improvements in school behavior, and
- ⇒ 64% of those students continued to show acceptable behavior into fall, 2000.

School personnel were also asked to agree or disagree with the following statement:

"As a result of this intervention, this student has an improved chance of being successful in school this year."

Of the 203 school personnel, the responses averaged 4.2 out of 5.

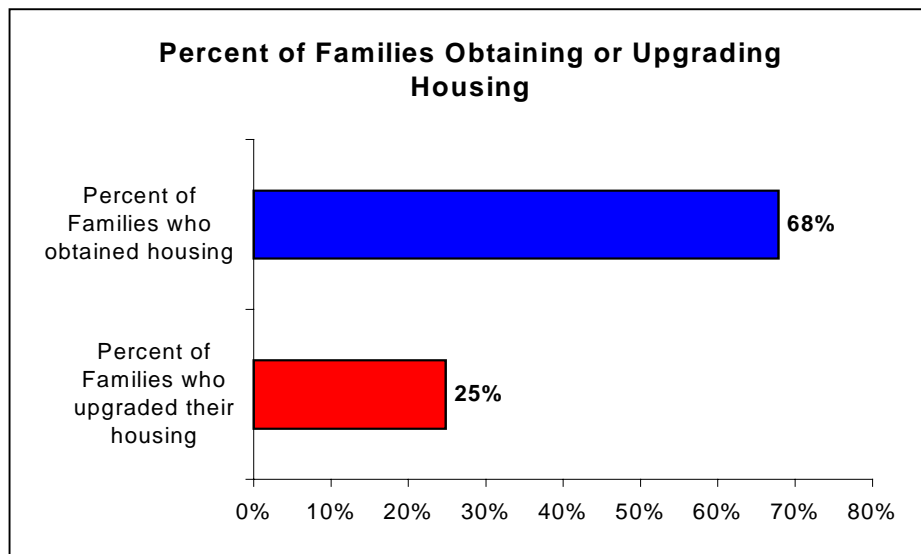
Strongly Disagree 1.....2.....3.....4.....5 Strongly Agree
↑↑

These data help support the following conclusion about the effectiveness of the Community Resources for Families program to impact school readiness:

School Readiness Summary: Data collected from CRWs and principals, school counselors, and teachers indicates that the Community Resources for Families Program strongly impacted school readiness. Students who were referred for specific school problems were rated by school personnel to have overcome those problems more than three-quarters of the time. In addition, the improvements have been rated as continuing up into the current school year.

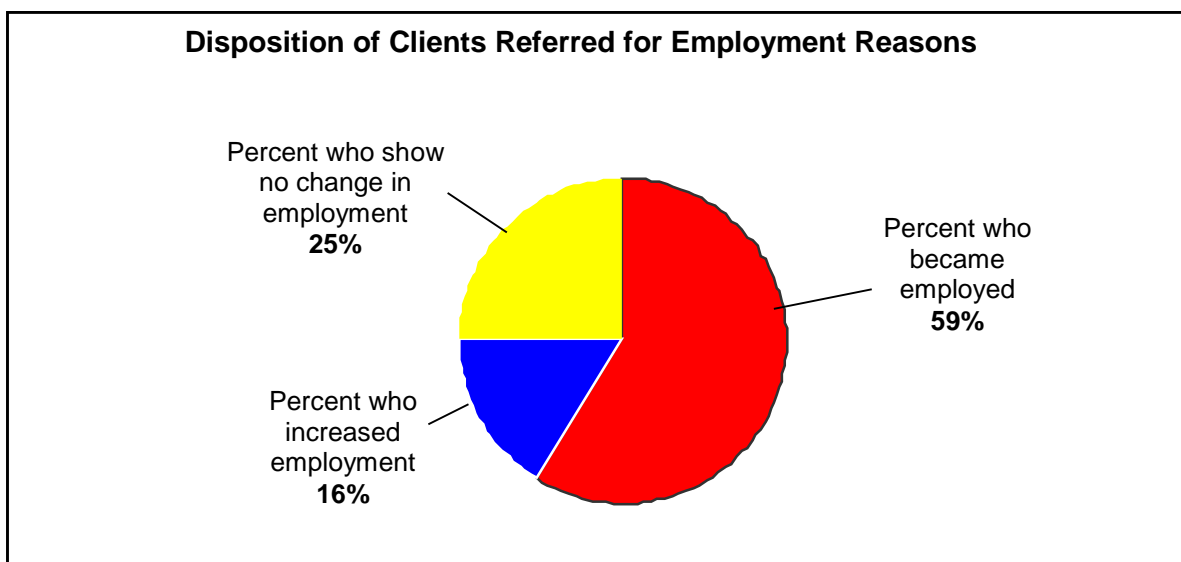
Goal #3: Increase the Self-Reliance of Families

The final goal of the program is to help families become more **self-reliant** in caring for their children. One way to measure this goal is to investigate the percent of families who were able to make improvements in sub-standard housing or to locate housing while they were in the program. The following graph illustrates that 137 families needed better housing when they entered the program, and 93% of those families succeeded in this goal:



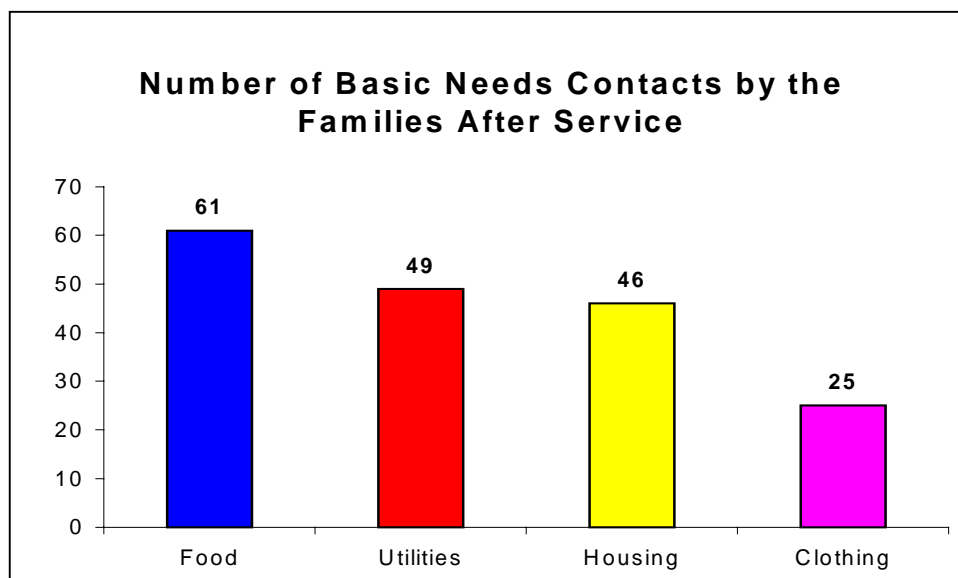
Another way to measure the goal of increased self-reliance is to record how many of the families improved their employment while they were in the program. It is always important to remember that in this program, the CRWs work *with* family members to achieve the goals, they do not do the work for them. Thus, the parents/guardians are taking the necessary steps to improve their living conditions or find jobs, and the CRWs work with them to find ways to do these things.

So, for those families who needed supplemental or improved employment when they entered the program, 75% found ways to either find employment or to supplement their employment as part of being in this program.

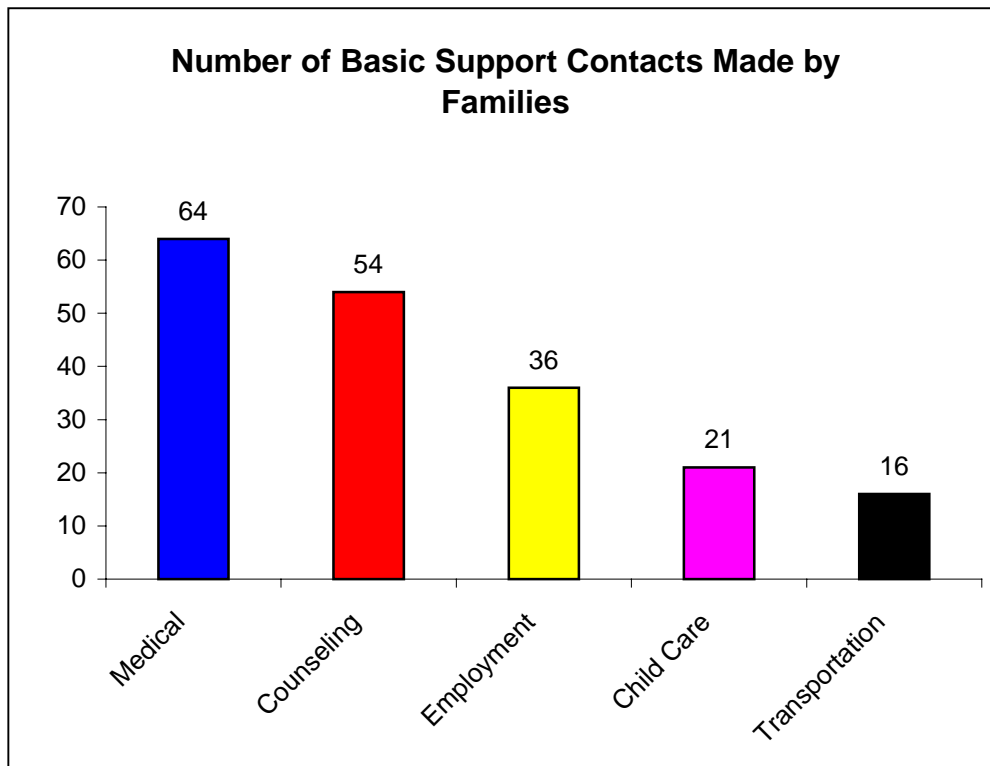


A third way to evaluate increases in self-reliance is to document how much the families utilized community resources during the 90-day service, and then to track how families continued to utilize additional community resources after service was over.

The study found that families, on average, made 5 community contacts during service, and 84% of the families continued to make an average of 3 or more contacts to access services or resources between the end of the service period and October 1, 2000. The chart below shows how the families utilized the community resources on their own after service to provide for their basic physical needs:



The study also found that families continued to utilize community agencies after the 90-day period was over to meet the emotion and health needs of their children. The chart below shows how many contacts the families made in these areas:



Self-Reliance Summary: Data from this study indicates that sample families achieved strong outcomes in terms of promoting self-reliance. Seventy-five percent (75%) of those families referred for employment purposes increased their employment during or after service, and 93% of those families needing housing or improvements in sub-standard housing accomplished that goal. In addition, 84% of families continued to contact community agencies after the service period was over, demonstrating that the CRWs had done a good job of teaching them how to be self-reliant and access services on their own.

STUDY CONCLUSIONS

This study has looked at data from a sample of 206 families served during 1999-2000 by the Community Resources for Families program. Overall, the study concludes that the Resources for Families program is effectively meeting its goals. In particular, the following conclusions can be drawn from the data:

1. *Data supports a conclusion that the program is effective in providing for the **safety and well-being** of children at risk of child abuse and neglect. After receiving CRFF services, a low rate of families (1%) had substantiated child abuse and neglect referrals.*
2. *The results of this study indicate that the **school readiness** of referred children is effectively enhanced by the Community Resources for Families program.*
3. *We can conclude from the data that this program model has a strong effect on increasing the **self-reliance** of families who participate in the program.*